SUBMIT: "COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT JUL 13 2012

Refund:	Amount Paid:	Date:	Permit #:
	\$75.0° ROS	7-18-10	

INSTRUCTIONS: No permits will be issued until all fees are proceeds are made payable to: Bayfield County Zoning Departs DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BE

るを製み	Zorling Dept.
SUED TO APPLICANT.	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED		I AND USE	SANITA	RY PRIVY		☐ CONDITIONAL USE		☐ SPECIAL USE	Е □ В.О.А.		OTHER
Owner's Name: AMDLTUE		Anth	710 J.M	MITTALE 31570 CK	20	City	L. Di	61/5	ush	Telephone:	77172
Address of Property:	1/2	(Coro	City/State/Zip;	MI	9	1884		l	Cell Phone:	e:
Contractor RELE				Contractor Phone:	Plumber:	ä				Plumber Phone:	hone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	gning Applicatio	on on behalf of Own		Agent Phone:	Agent N	Mailing Addr	Agent Mailing Address (include City/State/Zip):	ity/State/Zip);	Written A Attached	Written Authorization Attached □ Yes X No
PROJECT Lega	Legal Description:	 (Use Tax Statement) 		PIN: (23 digits) 04- 034-2-43-06-21-	-18-21-	105	0001-07000 000-25400		led Docume	nt: (i.e. Property Page(s)	Volume 7// Page(s) 405
1/4,	_ 1/4	Gov't Lot	(s)	CSM Vol & Page 299 (6) 80	& Page	Lot(s) No.	Block(s) No.		rision:		
section 21	, Township	以ろ N, Range	3° 6	Town	DVQ	Lagon		Lot Size	i e	2.63	2.632+2.22
Cre	Property/La	☐ Is Property/Land within 300 feet of R Creek or Landward side of Floodplain?	feet of River, S	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue—▶		ance Struct	Distance Structure is from Shoreline:	Shoreline : feet	L	Is Property in Floodplain Zone?	Are Wetlands Present?
☐ Shoreland —► ☐ Is	Property/La	and within 1000	feet of Lake,	Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue	#	Distance Structure		is from Shoreline :		☐ Yes ズ No	□ Yes X No
X Non-Shoreland									The state of the s		•
Value at Time of Completion * include donated time &	Project (What are you applying for)		# of Stories and/or basement	π Use	ber	# of bedrooms		What Sewer/Sar Is on the	What Type of Sewer/Sanitary System Is on the property?	3 H	Water
	New Construction	7	1-Story			,	☐ Municipal/City	1	Specify Type		☐ City
\$ 3000 . 000	☐ Conversion		2-Story			3	Sanitar	y (Exists)	Sanitary (Exists) Specify Type:	y Type:	
72 20	Run a Business on		□ No Basement	+		□ None	1 1	w/servic	e contract)		
Pr	Property		Foundation	1			☐ Compo	Compost Toilet None			
Existing Structure: (If permit being applied for is relevant to it) Proposed Construction:	permit being	applied for is re	levant to it)	Length:	34		Width:	00		Height:	16/16
Proposed Use	-			Proposed Structure	tructure				Dimensions	ons	Square Footage
		^o rincipal Struc Residence (i.e	ture (first st . cabin, hunti	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)	perty)	****	- Periodical		××		
Residential Use		W	with Loft with a Porch	1444					××		
,		W	with (2 nd) Porch	5			****		×	_	
		W	with (2 nd) Deck	(- Deliver	a.wor			×	_	
Commercial Use		W	with Attached Garage	Garage	4444				< ×	_	
	+	Bunkhouse w/	/ (□ sanitary,	Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or	ıarters, <u>or</u> □	cooking &	cooking & food prep facilities)	cilities) (× ×	_	idită
		Addition/Alteration (specify)	ration (specify)	ify)			A CONTRACTOR OF THE PARTY OF TH		 ×		
Municipal Use	¥	Accessory Building	lding (specify)	ify) Oar	arage					30)	1,440
		Accessory Bui	llding Additio	Accessory Building Addition/Alteration (specify)	specify)		Annual management of the state				440000
		Special Use: (explain)	explain)			- Lawrence			××	_ -	
		Other: (explain))	Livyy,					×		

Rec d for Issual los Owner(s):

must accompany this application)

All Owners badst sign

or letter(s) of authorization

this application)

Date

7

Date

I (we) declare that this application (i am (are) responsible for the detail a may be a result of Bayfield County above described property at apy rea

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES my accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) cy of information in (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which the providing in one of the providing in one

Address to send permit SQVA &

25

apone

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Secretarial Staff

Please complete (1) - (7) above (prior to continuing)

Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

## Feet Setback from the Lake (ordinary high-wath	Description Measurement Measurement Measurement	Prior to the placement or construction of a structure within ten (10) feet of the min	Setback to Privy (Portable, Composting)	Setback to Drain Field	Setback to Septic Tank or Holding Tank		Setback from the East Lot Line		Setback from the South Lot Line (50,10), Selver	Setback from the North Lot Line		Setback from the Established Right-of-Way	Setback from the Centerline of Platted Road		Description V
		nimum required	Ş A	400	30		S S	500	Z	100+		1304	+OH!		/leasureme
		setback, the	Feet	Feet	Feet	100000	Feet	Feet	Feet	Feet	lace of	Feet	Feet	188000	nt
	Measuremi WA NA NA 1367.6 1367.6 previously surveyed cor				Setback to Well		Elevation of Floodplain	Setback from 20% Slope Area	Setback from Wetland		Setback from the Bank or Bluff	Setback from the River, Stream, Creek	Setback from the Lake (ordinary high-water mark)		Description

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit # 1 / 2 - 63 + LS	Permit Date: 7-18-10		
Is Parcel a Sub-Standard Lot Sparcel in Common Ownership Structure Non-Conforming Yes (Fused/Contiguous Lot(s))	is Lot(s)) Va No	Mitigation Required □ Yes X No / Mitigation Attached □ Yes X No /	Affidavit Required ☐ Yes Z No Affidavit Attached ☐ Yes Z No
Granted by Variance (B.O.A.) Case #	Previo	Previously Granted by Variance (B.O.A.) ☐ Yes 《No Case	#
Was Parcel Legally Created 为Yes □ No Was Proposed Building Site Delineated 为Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed	XYes
inspection Record: Wests all set backs;	ofbacky;	,	Zoning District (没RB) Lakes Classification(/)
Date of Inspection: $7 - 12 - 12$	Inspected by: IMI tutal	utel	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? Dres DNO-(If No they need to be attached. May Mot be was bor human best attacher. Eccle Mo water ander pressure in Sturature.	ned? Dres DNO-(IF No they nam believed.	, 6	attached) decks + Chains must be placed on soptic tam < liets
Signature of Inspector: Michael Guta			Date of Approval's -/2
Hold For Sanitary: Hold For TBA:	Hold For Affidavit:	☐ Hold For Fees: ☐	

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT Date Star MAY 04 2012

Refund:	Amount Paid:	Date:	Permit.#:
	\$7500 CD	7:8:10	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zonling Department DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN!

START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	re made payable to: Bayfield County Zoning Department.	TIONS: No permits will be issued until all fees are paid.	
TO APPLICANT.		Saynek	
HOW DO I FILL OUT		Baymeld Co. Zoning Dept.	

Shoreland In Is Property/Land within 1000 feet of Lake, Pond or Flowage	☐ Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes—continue →	is the second se	Section Township N, Range W		1/4,1/4	Gov't Lot Lot(s) CSM	Legal Description: (Use Tax Statement) 04- 034-		15-4-159 Teachard 798-4459	cation on behalf of Owner(s))	100 - 0547		デージン	Trus + Barbara McKinney Po. Box 358	Owner's Name: Mailing Address:	TYPE OF PERMIT REQUESTED—► 🕅 LAND USE 🗆 SANITARY 🗎	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
	Distance Structure is from Shorelin		Nama Ragos	Town of: 54-55 Lo	33110	Vol & Page Lot(s) No. Block(s) No. Su	2-43-06-14-2	的		e: Agent Mailing Address (include City/State/Zip):	7	phone: Plumber:	Cally INT 54821	× 358 Cable, WI 548	ress: City/State/Zip:	☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE	HOW DO I FILL OUT THIS APPLICATION (visit of
	re: Is Property in Are Wetlands		13.6	Lot Size Acreage	Namakagon Lake Shore	Subdivision:	Volume Page(s)	ecorded Document: (i.e. Property Ownership)		e/Zip): Written Authorization	***************************************	Plumber Phone:	590-0045	2	Telephone:	USE B.O.A. DOTHER	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

C Collins	Existing Structur			-			3,500	>		Value at Time of Completion * include donated time & material
Control of the Contro	Existing Structure: (if permit being applied for is relevant to it)	THE PARTY STATES		Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	Addition/Alteration ☐ 1-Story + Loft	☐ New Construction	Project (What are you applying for)
	or is relevant to it)			□ Foundation	□ No Basement	☐ Basement	□ 2-Story	☐ 1-Story + Loft	3 1-Story	# of Stories and/or basement
-	Length:					- alterial		₹ Year Round	Seasonal	Use
					□ None		□ 3	2	<u> </u>	# of bedrooms
Loight.	Width: Height:	- Address - Addr	□ None	☐ Compost Toilet	Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	X Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System is on the property?
						on)		X₩ell	□ City	Water

□ Non-Shoreland

Proposed Use	Proposed Construction:	Existing Structure: (if permit being applied for is relevant to it)
Proposed S	Length:	Length:
Structure	ب بل	
	Width:	Width:
	2	
Jimensi	Height:	Height:

		The state of the s		The second secon
Proposed Use	\	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	×	
	×	Residence (i.e. cabin, hunting shack, etc.)	(×)	
		with Loft	×	***************************************
X Residential Use		with a Porch	×	7
		with (2 nd) Porch	(x)	
		with a Deck	×	Harmy
		with (2 nd) Deck	(×	
☐ Commercial Use		with Attached Garage	(X)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(x	
		Mobile Home (manufactured date)	(x)	
	X	Addition/Alteration (specify) deck W/Covered & Mycky)	(X X) 33 L	
Municipal Use		Accessory Building (specify)	1 2 × 20 1	0/6
		Accessory Building Addition/Alteration (specify)	×	3
		Govered entryway	6.6.	36
		Special Use: (explain)	(x	
		Conditional Use: (explain)	(X)	
		Other: (explain)	~ ×	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[[we] declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. | (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

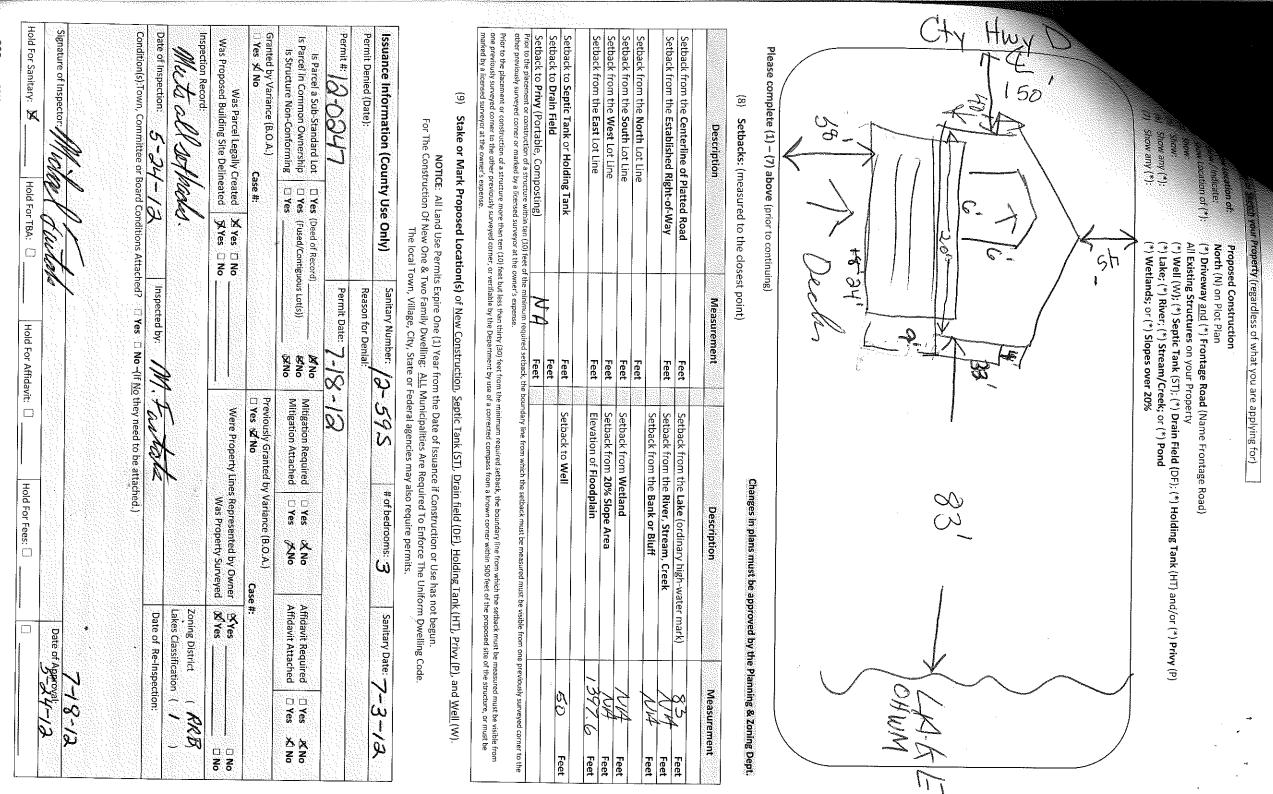
Add Holy to send Defmit	VOCTOBAS OF STATES	Owner(s):(If there are Multiple Owners listed of the Deed All Owners
432	Throu are signing on behal	ers listed divine
3235 K	n behalf of the or	Deed All Owner
1xording	alf of the gwner(s) a letter of authorization mus	s must sign <u>er</u> le
est Ro	of authorization	ter(s) of author
of Carle	must accompany th	ization must acco
Rak	this application	st accompany this application
3)	lication

2.5482/copy of Tax Statement Cently purchased the property send your Recorded Deed Date S

Date

W

Add Wto send Milmit



SUBMIT: COMPLETED APPLICATION, TAX

Bay⊴eld County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT
BAYF PLD COUNTY, WINCOMSIN

Bayfield Co. Zoning Dept.

Date: Permit #: Amount Paid: \$100.00 7-18-1 0 RD.

\$100

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. 5 4 HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

 				-	Municipal Use			Commercial Use				Residential Use			Proposed Use 🗸		Existing Structure: (if permit being applied for is relevant to it) Proposed Construction:	· · · · · · · · · · · · · · · · · · ·	Property	☐ Run a Business on	Relocate (existing bldg)	\$ Addition	New Cor	of Completion Pro * include donated time & (What are you material	Value at Time	Non-Shoreland	1	☐ Is Prope Creek or L	Section , / J , Township	1/4,1/4	LOCATION	PROTECT	Authorized Agent: (Person Signing Application on behalf of Owner(s))	43040 Harmon	Address of Property:
Other: (expla	Conditional	Special Use: (explain)	Accessory E	Accessory Building	Addition/A	Mobile Hor	Bunkhouse				-			Principal St	7		eing applied for	711000		siness on	(existing bldg)	Addition/Alteration	New Construction	Project (What are you applying for)			rty/Land within	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	S		Legal Description: (Use Tax Statement)		pplication on behalf	J.	
Other: (explain) Lacellana	Conditional Use: (explain)	(explain)	uilding Addition/	Building (specify)	Addition/Alteration (specify)	Mobile Home (manufactured date)	w/ (□ sanitary, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Principal Structure (first structure on property) Residence (i.e. cahin, hunting shack, etc.)			is relevant to it)	-	☐ Foundation	□ No Basement	☐ Basement	- 1	- 1	# of Stories and/or basement			🔏 Is Property/Land within 1000 feet of Lake, Pond or Flowage	liver,	N, Range 6	(e)	4			Ća i	
4 Abardwalk to	and the second s	- Arthur - A	Accessory Building Addition/Alteration (specify)		- Angel	ate)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	rage		Phine.			oridary ceri	cture on property)	Proposed Structure	Leigh	Length:				- And	☐ Year Round	- 1			If yescontinue -	ond or Flowage	otream (incl. Intermittent)	Nama		04-034-2-43-06-14-	circ riloite:	Agent Dhone:	Same	HOW HOW OF CELL
alk to la	<i>, ,</i> , ,	- Address	With	Turner Commence of the Commenc	- 19.44.		or Cooking & 1	and the second s			100		,	The state of the s	re					None] [and the state of t	Distance Stru	Distance Structure	akeyon	LOUS) NO.	1-4.00	Agent Walling Ad	Agent Mailing Ad	Plinabor	
ike	/	- www.	William William		777774		food prep facilities						the deferment of the comments			Width:	Width:	□ None	1 1		☐ Privy (Pit) Or	ı		Sew Is		101111111111111111111111111111111111111	Distance Structure is from Shoreline:	cture is from Shoreline :		Block(s) No.	- C	Agent mailing Address (include City/State/Zip):			able le
14				(() ()	-				_ -	1	Di				ilet	フ I	2			What Type of Sewer/Sanitary System is on the property?		feet	re ne :	reline : feet	Lot Size	Subdivision:	Volume_	State/Zip):			+ 548
8	× ;	×	×	×	×	×	×	×	×	×	×	×	× >	×	Dimensions	Height:	Height:			/ice contract)	Specify Type:	Specify Type:		oe of Y System operty?		□ No	X Yes	ls Property in Floodplain Zone?		1	Volume 395 Page(s) 389	A S		! (<u> </u>
#300 F	-))))	Sq.			- Children		o galloll)	<u> </u>								Acreage 16.165	, T. C.	Page(s) 389	Written Authorization Attached Yes X No	Plumber Phone:		184-2385
7										A Parlicina			- The state of the		Square Footage							□Well	□ City	Water		No	□Yes	Are Wetlands	C		Winership)	rization	100		S

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Pro

Authorized Agent: Owner(s) X June () Feel (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further a may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to above described property at any reasonable time for the purpod of inspection. (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) asto, Date Date 6-4-12

acknowledge that I (we) er accept liability which s to have access to the

Address to send permit

ST MA

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Slube

	Hold For Affidavit: Hold For Fees:	For TBA:	Hold For Sanitary:
Date of Approval — / A		Ą	Z Z
ed □ Yes □ No ed □ Yes □ ANo Zoning District (A-I) Lakes Classification (/) Date of Re-Inspection:		ected by:	Was Proposed Building Site Delineated Syes □ No □ N
Sanitary Date: Affidavit Required Affidavit Attached Case #:	ALL Municipalities Are Required to Entorce the Company also require permits. The or Federal agencies may also require permits. # of bedrooms: # of bedrooms: # of bedrooms:	rction Of New One & Two Family Dwelling: The local Town, Village, City, Stat W Use Only) Reason for Denial: Reason for Denial: Permit Date: Yes [Pused/Configuous Lot(s)] Yes [Pused/Configuous Lot(s)]	For The Construction Of New O The lo Issuance Information (County Use Only) Permit Denied (Date): Permit # 10-0548 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming
Changes in plans must be approved by the Planning & Zoning Dept. Description Description Measurement the Lake (ordinary high-water mark) the River, Stream, Creek the Bank or Bluff Wetland Feet 100dplain Feet 100dplain Feet 110dplain Feet 110dplain Feet 110dplain Feet 120% Slope Area Feet 120% Slope Area Feet 12	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Please complete (1) – (7) above (prior to continuing) Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured by the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning Deptice (prior to Ease (1) of the Planning & Zoning &	te (1) – (7) above (prior to continuing) Setbacks: (measured to the closest point) Measurement Feet Feet Centerline of Platted Road Feet Established Right-of-Way Feet South Lot Line Feet Forth Lot Line Feet For construction of a structure within ten (10) feet of the minimum required setback, and comer to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corner, or verifiable by the Department by corner to the other previously surveyed corne	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the South Lot Line Setback from the West Lot Line Setback from the West Lot Line Setback from the East Lot Line Setback from the East Lot Line Setback to Drain Field Setback to Privy (Portable, Composting) Pior to the placement or construction of a structure wore than ten (10) feet of the minimum requirement or construction of a structure more than ten (10) feet but less than thir one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense. (9) Stake or Mark Proposed Location(s) of New C
or (*) Privy (P)	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	roposed Construction North (N) on Plot Plan (*) Priveway and (*) Frontage Road (Name Front All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field y (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond y (*): (*) Wetlands; or (*) Slopes over 20%	show Location of: Show Location of (*): (4) Show: (5) Show any (*): (7) Show any (*):

County, WI

erial Map



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